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_	TAL CLAIMS	-	(Column	9 :	(Colu	m 2)			FEE	OR	SMALL	
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/	11000	(Column 1)	MENDEL	(Colu	mn 2)	(Column 3)	SK	ALL	ENTITY	OR	SMALL	
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9/	29/05	(Column 1)			mn 2)	(Column 3)				OR		
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EMT B	29/05	CLAINS		RIGI NUM PREVI	EST		A001			OR		
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